



# USER'S GUIDE TO FILLING OUT THE ONLINE PASSPORT APPLICATION WIZARD

## **Point of Contact**

Passport Office BLDG # 7092  
Military Personnel Division  
USAG Bamberg  
DSN: 469-8928 CIV:0951-300-8928

## **HOURS OF OPERATION**

MONDAY THRU FRIDAY  
Walk-Ins 0800-1200  
BY Appointment 1300-1600

INTRODUCTION: The On-Line Passport Application Wizard located at

[http://travel.state.gov/passport/forms/forms\\_847.html](http://travel.state.gov/passport/forms/forms_847.html) is an interactive On-Line program that allows applicants to enter personal information that is universally required to begin the following processes:

1. An initial Passport Book Application
2. A Passport Book renewal
3. Replacing a lost or stolen Passport Book
4. Passport Data is incorrect or needs to be changed

After entering the your personal data the Passport Application Wizard will automatically generate the appropriate forms; which you can save, print, and bring to the PASSPORT OFFICE unsigned along with any required supporting documentation.

Using the On-Line Passport Application Wizard is mandatory. Usage of this program ensures that:

1. Applicants have the appropriate form(s)
2. The information on the form(s) is legible
3. A Bar-Code is printed in the upper-left corner of the form(s) which allows the application packet to be tracked while it's being processed.

**\*\*NOTES:**

1. FILL OUT ON-LINE FORM USING ALL CAPITAL LETTERS
2. ENSURE THAT THE DATES THAT YOU ENTER ON THE FORM CORRESPONDE WITH THE DATES ON THE SUPPORTING DOCUMENTATION.
3. OBTAIN THE REQUIRED ORIGINAL DOCUMENTS PRIOR TO FILLING OUT ON-LINE WIZARD
  - a. [www.vitalchek.com](http://www.vitalchek.com) (fee based)
  - b. The state or county of issuance
4. REFER TO ORIGINAL DOCUMENTS FOR PERSONAL INFORMATION PERTAINING TO DATES, PERSONAL INFORMATION, AND LOCATIONS.
5. USE STANDARD SIZED PAPER (8.5x11in) WHEN PRINTING OUT FORMS
6. BRING ORIGINAL DOCUMENTATION AND COMPLETED FORM(S) TO PASSPORT OFFICE. WE WILL MAKE AND CERTIFY THE COPIES.
7. DO NOT FORGET TO WRITE IN A VALID GERMAN CIVILIAN NUMBER WHERE REQUIRED
8. DO NOT SIGN FORM UNTIL INSTRUCTED TO DO SO BY THE PASSPORT OFFICE
9. BRING A SEPARATE MONEY FOR EACH APPLICATION PROCESS
10. CALL OR COME BY THE PASSPORT OFFICE FROM 0800 TO 1200 IF YOU HAVE ANY QUESTIONS.
11. APPOINTMENTS ARE FROM 1300-1600 MONDAY THRU FRIDAY EXCLUDING FEDERAL HOLIDAYS AND UNFORESEEN CIRCUMSTANCES

The following is a Step by Step Guide to Using the Passport Application Wizard is located on the following pages. Failure to follow the instructions contained therein will result in your application packet to be delayed and possibly returned for corrections (meaning that you must re-start the entire process).

STEP 1 (About You) or (**ABOUT YOUR CHILD IF FILLING OUT AS PART OF A REPORT OF BIRTH**)

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First Name:

THE APPLICANT'S FIRST NAME

Middle Name:

THE APPLICANTS ENTIRE MIDDLE NAME

Last Name:

THE APPLICANT'S LAST NAME

Suffix:

LEAVE BLANK

Date of Birth:

APPLICANTS D.O.B. IN MM/DD/YYYY FORMAT

City of Birth:

APPLICANTS CITY OF BIRTH

Social Security Number:

APPLICANTS SSN (000-00-0000 if none)

Country/ State of Birth:

COUNTRY/STATE OF APPLICANTS BIRTH

Gender:

CHECK APPROPRIATE BOX

Height:

BE AS ACCURATE AS POSSIBLE

Hair Color:

SELECT APPROPRIATE COLOR

Eye Color:

SELECT APPROPRIATE COLOR

Occupation:

A GENERAL DESCRIPTION e.g. SOLDIER etc.

Your Employer:

USA or NONE

Click "NEXT"

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STEP2 (Contact Information) **(IT IS MANDATORY THAT THIS PAGE MUST BE FILLED OUT WITH THE INFORMATION PROVIDED)**

Where should the passport be mailed?

Street Address/RFD# Or P.O. Box: CHIEF MPD USAG BAMBERG Suite/Apt# LEAVE BLANK

Street address 2: ATTN: PASSPORT OFFICE UNIT 27535

City: APO

Country: UNITED STATES

State: AE - AF EUROPE

Zip Code: 09139

In Care Of: LEAVE BLANK

Is This Your Permanent Address? CHECK "NO" (a similar address menu will then drop down. Enter sponsors CMR address)

Your Email Address: THE SPONSOR'S AKO EMAIL ACCOUNT (No Yahoo, Google, or Hotmail accounts are acceptable)

Your Phone Number: USE A GERMAN CIVILIAN NUMBER, IF IT WONT FIT THEN LEAVE IT BLANK.

Click "NEXT"

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STEP 3 (Travel Plans)

Date Of Your Trip? LEAVE BLANK

Length Of Trip? LEAVE BLANK

Countries To Be Visited? LEAVE BLANK

Click "NEXT"

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**STEP 4 (Who should we contact in case of emergency) (MUST BE A STATESIDE ADDRESS AND PREFERABLY A FAMILY MEMBER)**

First & Last Name: William I. Am

Street Address / RFD# Or P.O. Box: 1234 N.E. Str

Apt/Suite#:

City: New York

State: New York

Zip Code: 12345

Telephone Number: 123-456-7890

Relationship: Father (USE FORMAL RELATIONSHIP TITLES e.g. MOTHER, SISTER, BROTHER, UNCLE, AUNT, ETC..)

Click "NEXT"

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**STEP 5 (Your Most Recent Passport)(IF FILLING OUT FOR A REPORT OF BIRTH YOU SHOULD ANSWER "NONE")**

Do you currently have any of the following? (CHECK WHAT EVER PERTAINS TO THE APPLICANT)

PASSPORT BOOK      PASSPORT CARD      BOTH      NONE

\*\*How you answer this question determines what form is created. (Be honest and you can't go wrong)

Click "NEXT"

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**STEP 6 (Parent & Spouse Information) (IF FILLING OUT FOR A REPORT OF BIRTH ENTER THE SPONSOR AND THEIR SPOUSE'S INFORMATION if married and if applicable)**

Father: ☐ UNKNOWN (If unknown check the box, otherwise refer to your birth certificate.)

First Name:

WILLIAM

Middle Name:

IAN

Last Name:

AM

Date of Birth:

MM/DD/YYYY

Place of Birth:

New York

U.S. Citizen? (check appropriate box)

☐ YES ☐ NO

Mother: ☐ UNKNOWN (If unknown check the box, otherwise refer to your birth certificate.)

First Name:

MARGE

Middle Name:

CINDY

Last Name (maiden):

AM-(SIMPSON)

Date of Birth:

MM/DD/YYYY

Place of Birth:

New York

U.S. Citizen? (Check appropriate box)

☐ YES ☐ NO

Spouse Have you (THE APPLICANT) ever been married? ☐ YES ☐ NO (check appropriate box)

*\*NOTE: if you click yes a similar address menu for current or former spouses information will drop down. Refer to current marriage license\**

Spouse's Or Former Spouse's Full Name:  
ANNA NICOLE SMITH

Date of Birth:  
MM/DD/YYYY

Place of Birth:  
SAD CITY, TEXAS

U.S. Citizen? (check appropriate box)  
☐ YES ☐ NO

Are you Widowed?  
☐ YES ☐ NO

Date Of Most Recent Marriage (MM/DD/YYYY):  
01/14/2010

Are You Divorced ☐ YES ☐ NO

Click "NEXT"

STEP 7 (Are you known by other names)? (This pertains to legal name changes e.g, marriages, not nick names or shortened versions of your current name. i.e. it does not matter if your name is James, but people call you Jim).

Other first name: Other last name:

Click "NEXT"

#### STEP 8 (Application Review)

THOROUGHLY REVIEW YOUR INFORMATION, CORRECT ANY ERRORS BY CLICKING THE "EDIT" BUTTON LOCATED TO THE RIGHT OF EACH RESPECTIVE CATEGORY.

IF NO FAULTS ARE FOUND SCROLL TO THE BOTTOM AND CLICK "NEXT."

#### STEP 9 (Summary of Fees)

☐ CHECK THE BOX THAT SAYS PASSPORT BOOK  
SCROLL DOWN AND CLICK SUBMIT (DO NOT CHECK EXPIDITE)

Click "SUBMIT"

#### STEP 10 (Next Steps)

CHECK THE "I have read and acknowledge the steps contained above".

SCROLL DOWN AND CLICK "CREATE FORM"

A DIALOG BOX WILL OPEN GIVING YOU THE OPTION TO OPEN, SAVE OR CANCEL.

**SAVE THE DOCUMENT**

PRINT THE DOCUMENT OFF PRIOR TO YOU COMING ITO THE PASSPORT OFFICE

\*\*\*THE PASSPORT WIZARD WILL AUTOMATICALLY GENERATE THE CORRECT FORM FOR YOU\*\*\*

\*\*\*DO NOT SIGN THE FORM\*\*\*